

**DEPARTMENT OF PUBLIC SERVICE REGULATION
APPLICATION FOR TRANSFER OF INTRASTATE CERTIFICATE OF
PUBLIC CONVENIENCE AND NECESSITY**

**THE PUBLIC SERVICE COMMISSION
OF THE STATE OF MONTANA**

1701 Prospect Avenue PO Box 202601 Helena, Montana 59620-2601 (406) 444-6198

Application is hereby made to the Public Service Commission of the State of Montana for transfer of an intrastate certificate of Public convenience and necessity, as provided by Chapter 12 of Title 69, MCA, as amended, and in this behalf it is respectfully Represented:

PLEASE ANSWER EACH QUESTION DEFINITELY
(Print or Type Information)

1. **Name of Transferor:** (Exactly as shown on Montana Intrastate Certificate proposed for transfer)

Name _____

Business Name (if any) _____

Mailing Address _____

Street or P.O.Box

City State Zip Code

Physical Address (if different from above) _____

Street

City State Zip Code

Home Telephone: _____ Business Telephone: _____

Fax Number _____

- a) If a partnership, list the names and addresses of partners:

- b) If a corporation, list the names and addresses of officers:

2. **Name of Transferee:** (Exactly as will be shown on Montana Intrastate Certificate proposed for transfer)

Name _____

Business Name (if any) _____

Mailing Address _____
Street or P.O.Box

City State Zip Code

Physical Address (if different from above) _____
Street

City State Zip Code

Home Telephone: _____ Business Telephone: _____

Fax Number _____

- a) If a partnership, list the names and addresses of partners:

- b) If a corporation, list the names and addresses of officers:

3. **PSC Certificate Number Proposed for Transfer:**

PSC NUMBER _____ SUB(S) _____

- a) Is the transferor retaining any certificate or portion of certificate issued under the above-noted PSC number?

☐ Yes ☐ No

If so, indicate on an attached sheet the exact wording of the certificate(s) proposed for transfer and for retention.

4. **Original PSC Certificates:**

- a) The original PSC Certificate(s) is/are returned with this application.

☐ Yes ☐ No

- b) The original PSC Certificate(s) has/have been lost and is/are not available for surrender.

☐ Yes ☐ No

5. **Transferee's Equipment:** List the equipment the transferee intends to operate, giving the required information below:

License No.	Year & Make of Vehicle	Seating Capacity	GVW

6. **Certificates Proposed for Transfer:**

- a) If the certificate(s) proposed for transfer is/are Class A and /or Class B, complete the following:

(1) Transferee intends to initially file a tariff of rates and charges. Yes ☐ No

(2) Transferee intends to adopt present tariffs of transferor. ☐ Yes ☐ No

- b) If the certificate(s) proposed for transfer authorizes Class C passenger transportation, complete the following:

Shipper Name	Shipper Address
1)	
2)	
3)	
4)	
5)	
6)	

7. **Effective Date:**

Transferor and transferee request the transfer of PSC No. _____ to become effective on the following date: _____. (In no case may the effective date be less than thirty-five (35) days from the filing of this application.)

8. **Transferee's Present Operating Authority:**

Transferee presently holds the following Intrastate certificate(s) from the Montana Public Service Commission:

PSC No(s). _____

9. **Warranty and Agreement of Transferor and Transferee:**

- a) Transferee agrees to furnish liability and cargo insurance filings, meeting the minimum requirements set forth by the Public Service Commission, upon approval of the proposed transfer.
- b) The proposed transfer of authority is not for the purpose of hindering, delaying, or defaulting creditors.
- c) Transferor agrees to file with the Public Service Commission, prior to Public Service Commission approval of the proposed transfer, the annual financial report and filing fee for the most recent accounting period.
- d) Appendix A is completed and attached.

10. Signatures:

STATE OF MONTANA) ss.

County of _____)

_____, BEING FIRST DULY SWORN, deposes and says that he/she is the TRANSFEROR in the above entitled proceeding, that he/she has read the foregoing application and knows the contents thereof and believes it to be true.

(Title) _____

Subscribed and sworn to before me this _____ day of _____, _____

Notary Public for the State of _____

Residing at _____

My Commission Expires _____

(S E A L)

STATE OF MONTANA) ss.

County of _____)

_____, BEING FIRST DULY SWORN, deposes
and says that he/she is the TRANSFEREE in the above entitled proceeding, that he/she has read the foregoing
application and knows the contents thereof and believes it to be true.

(Title) _____

Subscribed and sworn to before me this _____ day of _____, _____

Notary Public for the State of

Residing at _____

My Commission Expires _____

(S E A L)

APPENDIX A
(TO BE COMPLETED BY TRANSFEREE)
BALANCE SHEET
(ASSETS)

CURRENT ASSETS	
1. Cash and Working Funds	
2. Special Deposits	
3. Temporary Cash Investments	
4. Notes Receivable	
5. Accounts Receivable	
6. Prepayments	
7. Materials and Supplies	
8. Other Current Assets	
9. TOTAL CURRENT ASSETS	
TANGIBLE PROPPERTY	
10. Carrier Operating Property	
11. Less: Reserve for Depreciation	
12. Carrier Operating Property Leased to Others	
13. Less: Reserve for Depreciation	
14. Non-Carrier Operating Property	
15. Less: Reserve for Depreciation	
16. TOTAL TANGIBLE PROPERTY	
INTANGIBLE PROPERTY	
17. Organization, Franchises, and Permits	
18. Less: Reserve for Amortization	
19. Other Intangible Property	
20. Less: Reserve for Amortization	
21. TOTAL INTANGIBLE PROPERTY	
22. Total Investment Securities and Advances	
23. Total Special Funds	
24. Total Deferred Debits	
25. TOTAL ASSETS	

BALANCE SHEET
(LIABILITIES)

CURRENT LIABILITIES	
26. Notes payable & Matured Long Term Obligations	
27. Accounts Payable	
28. Wages Payable	
29. C.O.D.'s Unremitted	
30. Taxes Accrued	
31. Interest Accrued	
32. Matured Interest	
33. Other Current Liabilities	
34. TOTAL CURRENT LIABILITIES	
LONG TERM DEBT DUE WITHIN ONE YEAR	
35. Equipment Obligations and Other Debt	
LONG TERM DEBT DUE AFTER ONE YEAR	
36. Advances Payable	
37. Equipment Obligations	
38. Less: Reacquired and Nominally Issued	
39. Other Long Term Obligations	
40. Less Reacquired and Nominally Issued	
41. TOTAL LONG TERM DEBT DUE AFTER ONE YEAR	
42. Total Deferred Credits	
43. Total Reserves	
SHAREHOLDERS' (OR PROPRIETORS') EQUITY	
44. Total Capital Stock	
45. Total proprietors' Capital	
46. Total Retained Earnings	
47. TOTAL EQUITY	
48. TOTAL LIABILITIES & EQUITY	

INCOME STATEMENT

(Complete if Transferee is currently in the transportation business)

OPERATING REVENUE	
1. Intrastate Revenue	
2. Interstate Revenue	
3. Non-Regulated Revenue	
4. TOTAL REVENUE	
EXPENSES	
5. Salaries – Officers & Supervisory Personnel	
<i>Salaries & Wages</i>	
6. Clerical & Administration	
7. Drivers & Helpers	
8. Cargo Handlers	
9. Vehicle Repair & Repair	
10. Other Labor	
<i>Other Fringes</i>	
11. Payroll Taxes	
12. Workman’s Compensation	
13. Pension & Welfare Benefits	
<i>Operating Supplies & Expenses</i>	
14. Fuel for Motor Vehicles	
15. Vehicle Parts	
16. Other Operating Supplies & Expenses	
17. General Supplies & Expenses	
<i>Operating Taxes & Licenses</i>	
18. Gas, Fuel, & Oil Taxes	
19. Real Estate & Personal Property Taxes	
20. Vehicle License & Registration Fees	
21. Other Taxes	
22. Insurance	
23. Communications & Utilities	

<i>Depreciation & Amortization</i>		
24.	Revenue Equipment	
25.	Other	
<i>Purchased Transportation</i>		
26.	With Driver	
27.	Without Driver	
28.	Building and Office Equipment Rents	
29.	Gain or Loss of Disposition of Operating Costs	
30.	Miscellaneous Expenses	
31.	TOTAL EXPENSES	
32.	NET INCOME OR LOSS	